



1 in Rec/#

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor:	STARR et al.	Examiner:	Rutao Wu
Application No.:	10/045,503	Art Unit:	3628
Filed:	November 7, 2001	Docket No.:	ARIBP051
Title:	METHOD FOR SELECTING AN OPTIMAL BALANCE BETWEEN DIRECT COST AND A NUMBER OF SUPPLIERS		

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in a prepaid envelope addressed to:
Commissioner for Patents, Mail Stop RCE, P.O. Box 1450, Alexandria, VA 22313-1450 on:

3/21, 2008.

Veronica Pula

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

This is a Request for Continued Examination (RCE) under 37 CFR §1.114 of the above-identified application.

1. Submission required under 37 CFR §1.114

a. ☒ Previously submitted:

☒ Consider the amendment(s)/reply under 37 CFR §1.116 previously filed on January 21, 2008.

☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____

☐ Other _____

b. ☐ Enclosed:

☐ Amendment/Reply

☐ Affidavit(s)/Declaration(s)

☐ Information Disclosure Statement (IDS)

☐ Other

03/24/2008 SDENB083 00000042 10045503

01 FC:1801
02 FC:1251

810.00 OP
120.00 OP

c. Fee Calculation: The fee for excess claims, if applicable, has been calculated as shown below.

				Small Entity			Large Entity	
				Rate	Fee		Rate	Fee
RCE FILING FEE				x \$405 = \$		OR	x \$810 = \$	810.00
CLAIMS	After RCE	*HP	Extra					
Total	22	23		x \$25 = \$		OR	x \$50 = \$	
Independent	3	4		x \$105 = \$		OR	x \$210 = \$	
Multiple Dependent Claims			-0-	x \$185 = \$		OR	x \$370 = \$	
*HP = Highest previously paid				TOTAL FEES \$			TOTAL FEES \$	810.00

2. Miscellaneous:

- a. ☐ Suspension of action on the above-identified application is requested under 37 CFR §1.103(c) for a period of _____ months.
- b. ☐ Other _____


3. ☒ Applicant hereby petitions for an extension of time as follows:

	SMALL ENTITY			LARGE ENTITY	
	Rate	Add'l Fee		Rate	Add'l Fee
<input checked="" type="checkbox"/> Extension for Response within FIRST month	x \$60 = \$		OR	x \$120 = \$	120.00
<input type="checkbox"/> Extension for Response within SECOND month	x \$230 = \$		OR	x \$460 = \$	
<input type="checkbox"/> Extension for Response within THIRD month	x \$525 = \$		OR	x \$1050 = \$	
<input type="checkbox"/> Extension for Response within FOURTH month	x \$820 = \$		OR	x \$1640 = \$	
<input type="checkbox"/> Extension for Response within FIFTH month	x \$1115 = \$		OR	x \$2230 = \$	

4. ☒ Applicant(s) hereby petition that any additional required extension of time be granted.
5. ☒ Enclosed is our Check No. 3644 in the amount of \$930.00 to cover the RCE Fee required under 37 CFR §1.17 (e), the additional claim fee, if any, and/or extension of time fees.
6. ☐ Please charge Deposit Account No. 50-0685 (ARIBP051) in the amount of \$_____ to cover the RCE Fee required under 37 CFR §1.17 (e), the additional claim fee, if any, and/or extension of time fees.
7. ☒ If the required fees are missing or any additional fees are required during the pendency of the subject application, please charge such fees or credit any overpayment to Deposit Account No. 50-0685 (ARIBP051).
8. ☐ Applicant Initiated Interview Request Form.
9. ☒ Please continue to send correspondence to the following address:

CUSTOMER NO. 21912
VAN PELT, YI & JAMES LLP
 10050 N. Foothill Blvd., Ste. 200
 Cupertino, CA 95014
 Tel (408) 973-2585 Fax (408) 973-2595

Date: 3/21/08


 Robyn Wagner
 Reg. No. 50,575